

CK# 40592

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official LC Building Official MA 4-4-18
AP# 1804-21 Date Received 4-4-18 By MA Permit # 36580
Flood Zone X Development Permit _____ Zoning A3 Land Use Plan Map Category A
Comments 5 yr Temp use permit for son
Recorded Affidavit Deed
FEMA Map# _____ Elevation _____ Finished Floor 1' above River _____ In Floodway _____
☐ Recorded Deed or ☐ Property Appraiser PO ☒ Site Plan ☒ EH # 18-0272 ☐ Well letter OR
☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid
☐ DOT Approval ☐ Parent Parcel # _____ ☒ STUP-MH 1804-20 ☒ 911 App
☐ Ellisville Water Sys ☒ Assessment Paid on Property ☐ Out County ☐ In County ☒ Sub VF Form
over 2nd Unit

Property ID # 24-55-16-03707-032 Subdivision _____ Lot# _____

- New Mobile Home ☒ Used Mobile Home _____ MH Size 28x76/80 Year 2018
- Applicant PAUL BARNEY Phone # (386) 209-0906
- Address 466 SW DEP J. DAVIS LN, LAKE CITY, FL 32024
- Name of Property Owner BLASEJEWSKI, WALTER & BETTY Phone# _____
- 911 Address 688 SW SHEPPARD WAY, LAKE CITY, FL 32024
- Circle the correct power company -
FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home BLASEJEWSKI, BROD & PADINA Phone # 386-433-6211
Address 693 SW GULL DR. LAKE CITY, FL 32024
- Relationship to Property Owner SON & DAUGHTER-IN-LAW
- Current Number of Dwellings on Property 1
- Lot Size 497' X 445' Total Acreage 5.010
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property US 90 TO I-75 SOUTH TO EXIT 423 (SR-47) SOUTH
ON SR47 TO SW WALTER AVE T/L CROSS CR-240, BECOMES OLD WIRE RD TO
SW NAUTILUS RD, T/L TO S.W. SHEPPARD WAY, T/R TO SITE ON RIGHT AT
670 SW SHEPPARD WAY ON RIGHT.
- Name of Licensed Dealer/Installer PAUL E. ALBRIGHT Phone # 386-365-5314
- Installers Address 199 SW THOMAS TERR. LAKE CITY, FL 32024
- License Number 1H-1025239 Installation Decal # 48883

MA-Spoke with Paul 4-9-18

581.52

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer PAUL ALBRIGHT License # 141025239

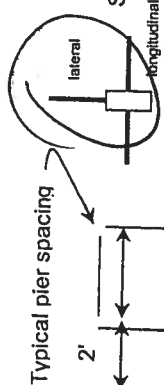
911 Address where home is being installed. 670 SHEPARD WAY
LAKE CITY, FL 32024

Manufacturer LIVE OAK Length x width 28'0"-8'0"

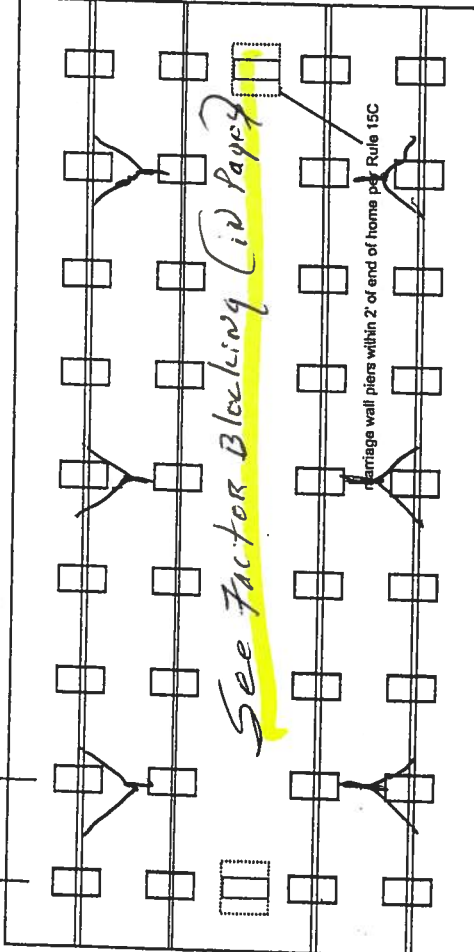
NOTE: if home is a single wide fill out one half of the blocking plan
if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials J. ALB



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



New Home ☒ Used Home ☐

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☐

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 48883

Triple/Quad ☐ Serial # 32494

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 dsf	3'		4'	5'	6'	7'	8'
1500 dsf	4'6"		6'	7'	8'	8'	8'
2000 dsf	6'		8'	8'	8'	8'	8'
2500 dsf	7'6"		8'	8'	8'	8'	8'
3000 dsf	8'		8'	8'	8'	8'	8'
3500 dsf	8'		8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17x22

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.) 17x25

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

ANCHORS

Opening Pier pad size

17 23x32 (8') 4 ft 5 ft 5 ft

3 17x25

4 17x25

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer

OTHER TIES

Sidewall Number 16-16

Longitudinal Marriage wall 4

Shearwall 4

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

x 1500 x 1500 x 1500

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

x 1500 x 1500 x 1500

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing . A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. bending capacity.

 Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Paul C. Wright

Date Tested

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. Port

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. Port

Site Preparation

Debris and organic material removed
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: 6d Length: 6" Spacing: 2ft
Walls: Type Fastener: 3d Length: 6" Spacing: 2ft
Roof: Type Fastener: 6d Length: 6" Spacing: 2ft
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials Port

Type gasket Factor

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg.
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

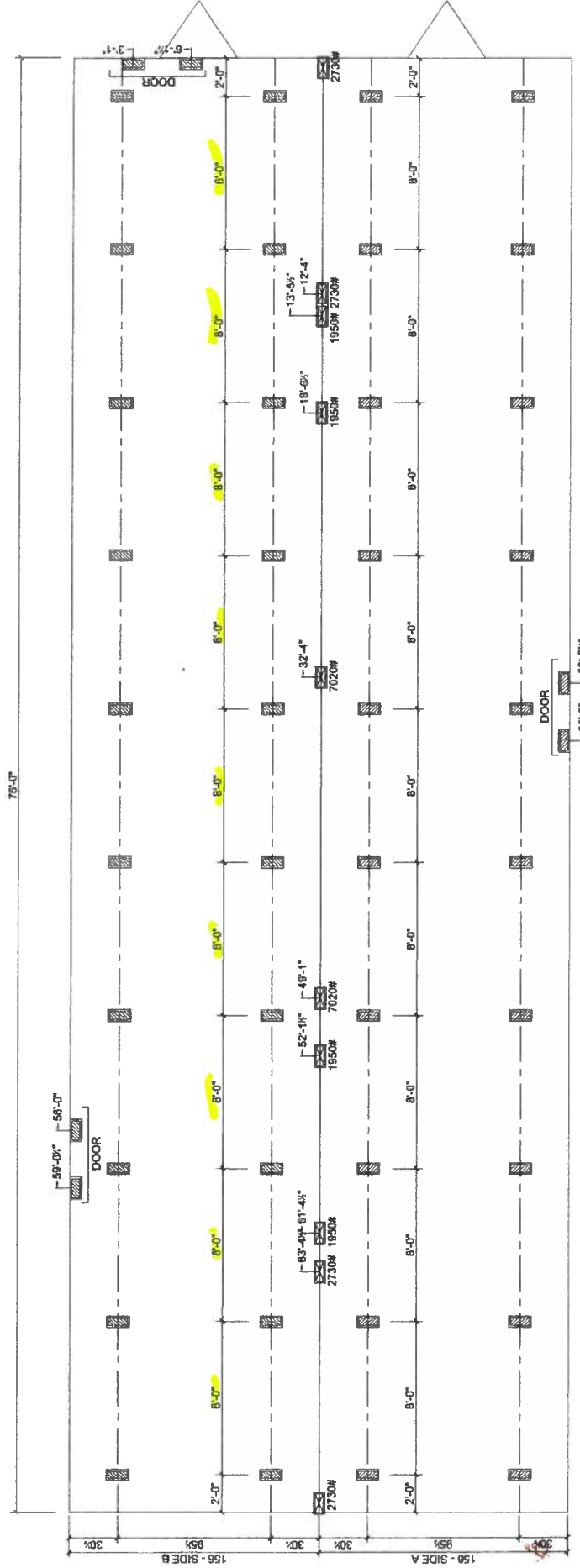
Miscellaneous

Skirting to be installed. Yes No
Dryer vent installed outside of skirting. Yes No
Range downflow vent installed outside of skirting. Yes No
Drain lines supported at 4 foot intervals. Yes No
Electrical crossovers protected. Yes No
Other:

Bonding wire

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Paul C. Wright Date



TIEDOWN LOCATIONS
 X MARRIAGE LINE OPENING SUPPORT PIER/TYP.
 Hatched rectangle SUPPORT PIER/TYP

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. QUANTITY AND SPACING MAY VARY BASED ON PROJECT TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

8-12-2013

Live Oak Homes
MODEL: L-2764D - 28 X 80
4-BEDROOM / 2-BATH

- | | |
|------------------------------|---|
| (A) MAIN ELECTRICAL | (G) DUCT CROSSOVER |
| (B) ELECTRICAL CROSSOVER | (H) SEWER DROPS |
| (C) WATER INLET | (I) RETURN AIR (W/OPT. HEAT PUMP OH DUCT) |
| (D) WATER CROSSOVER (IF ANY) | (J) SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT) |
| (E) GAS INLET (IF ANY) | |
| (F) GAS CROSSOVER (IF ANY) | |

SPARTAN L-2764D

Overall Dimensions:
 Total Width: 26'-0"
 Total Depth: 76'-0"

Room Details:

- Master Bedroom:** 14'-1" X 12'-8"
- Retreat:** 9'-3" X 12'-8"
- Living Room:** 19'-9" X 12'-8"
- Family Room:** 17'-4" X 12'-8"
- Dining Room:** 10'-3" X 12'-8"
- #2 Bedroom:** 10'-4" X 12'-8"
- #3 Bedroom:** 12'-10" X 12'-8"
- #4 Bedroom:** 13'-1" X 12'-8"

Bathrooms:

- M.BATH:** Master Bathroom
- #2 BATH:** Second Bathroom

Other Features:

- WASH DRY:** Laundry area
- REFER:** Refrigerator location
- STOVE:** Kitchen stove location
- P.BOX:** Phone box location
- 3680:** Entry area
- 3027:** Kitchen area
- 3053:** Hallway area
- 4053E:** Bedroom area

L-2764D
4-BEDROOM / 2-BATH
28 X 80 - Approx. 1976 Sq. Ft.

6-3-2013

- * All room dimensions include closets and square footage figures are approximate.
- * Transom windows are available on optional 8"-J" sidewall houses only.
- * Underpinning shown is optional.

License Number: IH / 1025239 / 1 Name: PAUL E. ALBRIGHT

Order #: 3173	Label #: 48883	Manufacturer: Live Oak	(Check Size of Home)
Homeowner: Jewski	Year Model: 2018	Length & Width: 28x80	Single _____
Address: 670 Sheppardway	Type Longitudinal System: 6	Type Lateral Arm System: _____	Double ☒ _____
City/State/Zip: Lake City /	New Home: ☒ Used Home: _____	Data Plate Wind Zone: 2	Triple _____
Phone #: 386 433 6211			HUD Label #: _____
Date Installed: _____			Soil Bearing / PSF: 1500
Installed Wind Zone: 2			Torque Probe / in-lbs: 285
			Permit #: _____
Note: _____			

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

48883

LABEL #

DATE OF INSTALLATION

PAUL E. ALBRIGHT

NAME

IH / 1025239 / 1

3173

LICENSE #

ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

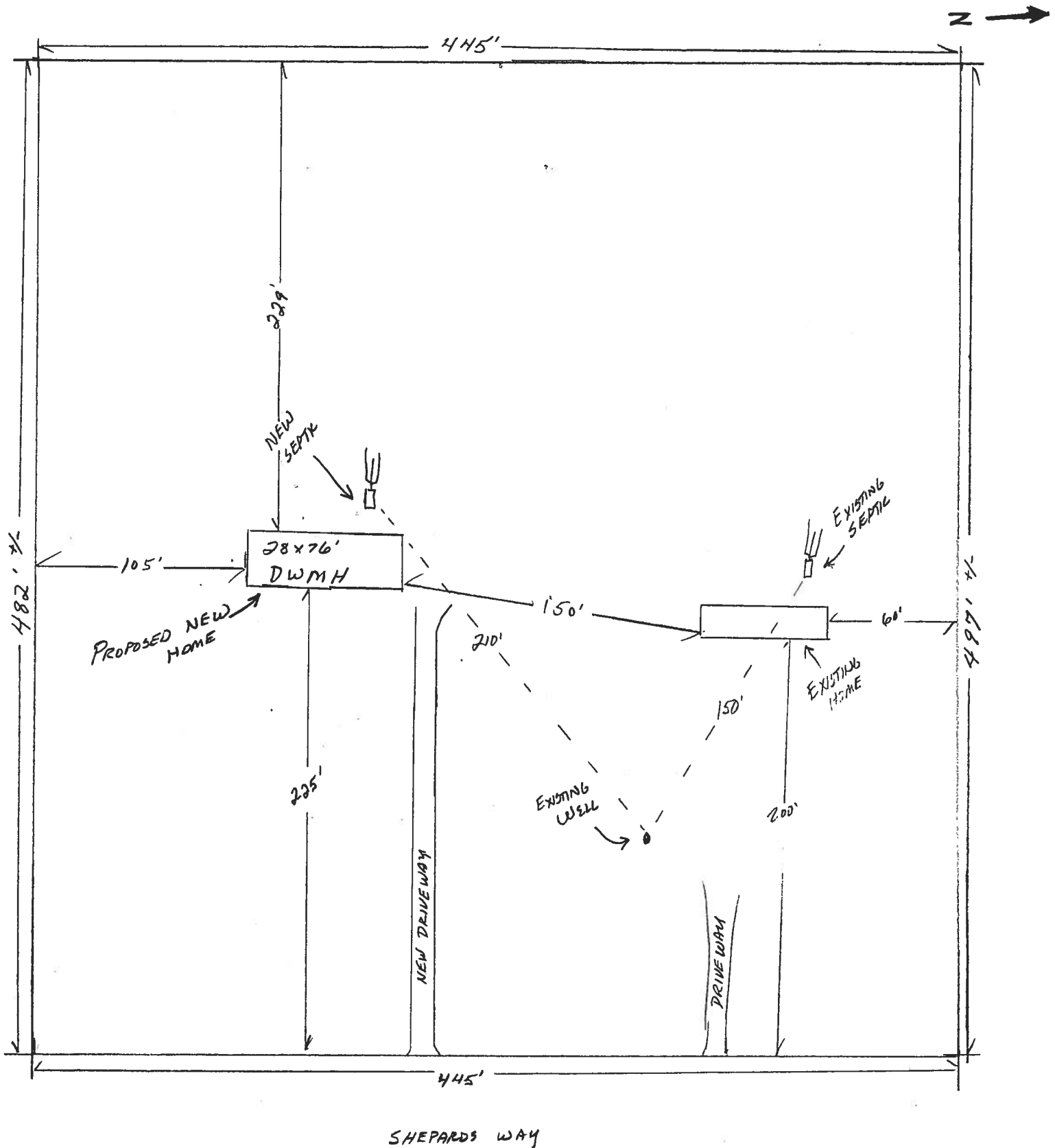
INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

SITE PLAN FOR BLASEJEWSKI JOB

DATE: 3-30-18 BY: PAUL BARNEY SCALE: 1cm = 25' MDL

PARCEL ID #: 24-55-16-03707-032 ACRES: 5.010



District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued:	4/5/2018 9:43:27 AM
Address:	688 SW SHEPPARD Way
City:	LAKE CITY
State:	FL
Zip Code	32024
Parcel ID	03707-032

REMARKS: Address for proposed structure on parcel. 2nd address on this parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

WARRANTY DEED
INDIVID TO INDIVID

This Warranty Deed Made the 15th day of November A. D. 1999 by

ANDREW J. DICKS, a married man not residing on the property described herein.

hereinafter called the grantor, to WALTER S. BLASEJEWSKI and BETTY M. BLASEJEWSKI,
his wife

whose postoffice address is Rt. 2, Box 375-6, Lake City, FL 32024
hereinafter called the grantee.

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and
their heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other
valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, re-
leases, conveys and confirms unto the grantee, all that certain land situate in Columbia
County, Florida, viz: S $\frac{1}{2}$ Tract 27 Great South Timber

TOWNSHIP 5 SOUTH, RANGE 16 EAST

Section 24: Commence at the Southwest corner of said Section 24 and run
thence N 89°30'55" W a distance of 1345.14 feet to the West right-of-way
line of Shepherd Road, a 40 foot County maintained road; thence N
01°19'57" E along said West right-of-way line a distance of 697.93 feet;
thence N 02°07'47" E along said West right-of-way line a distance of
99.65 feet to the POINT OF BEGINNING; thence N 89°30'55" W 482.47 feet;
thence N 00°15'54" E 445.63 feet; thence S 89°30'55" E 496.98 feet to the
West right-of-way line of Shepherd Road; thence S 02°07'47" W along said
West right-of-way line 445.81 feet to the POINT OF BEGINNING, containing
5.01 acres more or less. Subject to Power Line Easement and subject to
Restrictions recorded in Official Record Book 0786, Pages 0401-0403,
Columbia County, Florida.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any-
wise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land
in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the
grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of
all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent
to December 31, 1998.

FILED AND RECORDED IN PUBLIC
RECORDS OF COLUMBIA COUNTY, FL

99-19635

1999 NOV 22 PM 2:12

In Witness Whereof, the said grantor has signed and sealed these presents the day and year
first above written.

Signed, sealed and delivered in our presence:

Witness SHIRLEY HATSON

Witness SUZANNE D. ADAMS
STATE OF Florida
COUNTY OF Columbia

ANDREW J. DICKS

I HEREBY CERTIFY that on this day, before me, an officer duly
authorized in the State aforesaid and in the County aforesaid to take
acknowledgments, personally appeared ANDREW J. DICKS

to me known to be the person described in and who executed the
foregoing instrument and HE acknowledged before me that HE
executed the same.

WITNESS my hand and official seal in the County and
State last aforesaid this 15th day of
November, A. D. 1999

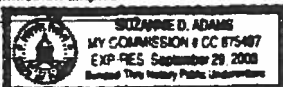
NOTARY PUBLIC

SUZANNE D. ADAMS

My Commission Expires

This Instrument prepared by: Lennil H. Dicks

Address: U. S. 90 West, Lake City, Florida 32055



Documentary Stamp 136.50
Intangible Tax
P. DeWitt Cason
Clerk of Court
by [Signature] D.C.



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, PAUL E ALBRIGHT, give this authority and I do certify that the below
Installers Name
referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
PAUL BARNEY	<i>Paul Barney</i>	FREEDOM HOMES
LINDA PENHALIGON	<i>Linda Penhaligon</i>	FREE DOM HOMES

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Paul E Albright
License Holders Signature (Notarized)

TH1025239
License Number

11-8-17
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: SUWANNEE

The above license holder, whose name is PAUL E ALBRIGHT,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 8 day of NOVEMBER, 2017.

Paul Barney
NOTARY'S SIGNATURE

(Seal/Stamp)



PAULA BARNEY
MY COMMISSION # GG 040180
EXPIRES: October 19, 2020
Bonded Thru Budget Notary Services

12/30/2016 10:30 Freedom Mobile Home Sales
Dec 30 16, 04:01p Whittington electric inc,

(FAX)3867524757

P.002/002

3866843906

p.1

12/29/2016 15:57 Freedom Mobile Home Sales

(FAX)3867524757

P.002/002

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1804-21 CONTRACTOR Paul Albright PHONE _____

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL 1074	Print Name <u>WHITTINGTON ELECTRIC</u> License #: <u>E1300 2957</u> Qualifier Form Attached ☐	Signature <u>[Signature]</u> Phone #: <u>386 972 1700</u>
MECHANICAL A/C <u>B</u> 1609	Print Name <u>STYLECREST</u> License #: <u>CAC1817458</u> Qualifier Form Attached ☐	Signature <u>[Signature]</u> Phone #: <u>850-769-1453</u>

Qualifier Forms cannot be submitted for any Specialty License:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015

New Columbia



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

FW

PERMIT NO: 18-3272
DATE PAID: 3/28/18
FEE PAID: 310.00
RECEIPT #: 1836259

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Walter BlasejewskiAGENT: Robert Ford Jr. North Florida Septic Tank Inc;TELEPHONE: 386-755-6372MAILING ADDRESS: 741 SE State Road 100 Lake City Fla 32025

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDEFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 1 BLOCK: 1 SUBDIVISION: meets & bonds PLATTED: _____

PROPERTY ID #: 24-55-16-03707-003 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 5.010 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☒ <2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 670 SW Sheppard Way

DIRECTIONS TO PROPERTY: Hwy 475 To 240 FL Follow to old wire
TR Follow to SW Nautilus Rd FL Follow to SW Sheppard
Way TR Follow to Site on Right

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Single Family	4	1976	28'x80
2	M/H			
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Robert W Ford Jr DATE: 3/8/18

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM

PERMIT #: 12-SC-1834572
APPLICATION #: AP1336259
DATE PAID: 328.18
FEE PAID: 310.00
RECEIPT #: 1336259
DOCUMENT #: PR1100719

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: WALTER**18-0272 BLASEJEWSKI

PROPERTY ADDRESS: 670 SW SHEPPARD Way Fort White, FL 32038

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 03707-003

[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [1,050] GALLONS / GPD Septic tank CAPACITY
A [] GALLONS / GPD N/A CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
R [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DOSES PER 24 HRS #Pumps []

D [500] SQUARE FEET drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [x] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [x] TRENCH [] BED []

F LOCATION OF BENCHMARK: 10" oak tree N of system site

I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [54.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] INCHES

O

T

H

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R

SPECIFICATIONS BY: Robert W Ford

TITLE: Master Contractor

APPROVED BY: Sallie Ford
Sallie A Ford

TITLE: Environmental Health Director

Columbia CHD

DATE ISSUED: 04/03/2018

EXPIRATION DATE: 10/03/2019

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

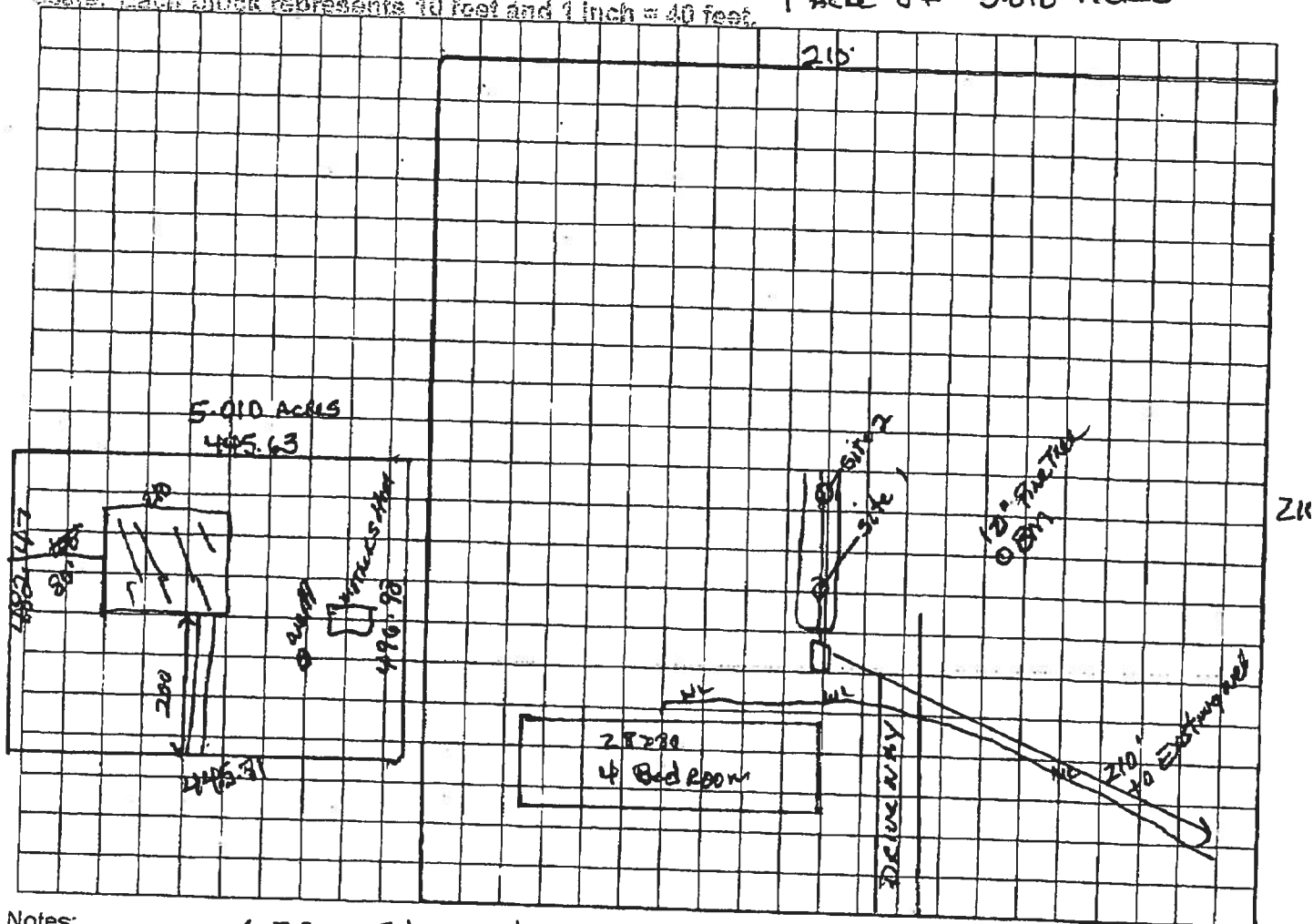
Permit Application Number 48-0222

Blaszejewski

PART II - SITEPLAN

1 Acre of 5-010 Acres

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: 670 SW Sheppards Way

Blasejewski

5.010 ACRES

03707-032

Site Plan submitted by: Robert W. Jandl DATE: 3/28/18

Plan Approved ☒ Not Approved ☐

By Sally Jerald Env Health Director

Agent

Date 4-3-18

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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